UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: 5/13/05	2 Serial/Patent # 10-517,318

3 Please refund the following fee(s):	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
✓ Filing	1	3/9/05	$ 100
Amendment			$
Extension of Time			$
Notice of Appeal/Appeal			$
Petition			$
Issue			$
Cert of Correction/Terminal Disc.			$
Maintenance			$
Assignment			$
Other			$

7 TOTAL AMOUNT OF REFUND	$ 100 00

8 TO BE REFUNDED BY:

	Treasury Check
✓	Credit Deposit A/C #:
9	19 -- 0 0 8 9

10 REASON:

✓	Overpayment
	Duplicate Payment
	No Fee Due (Explanation):

11 REFUND REQUESTED BY:

TYPED/PRINTED NAME: _Anita Johnson_   TITLE: _Paralegal_

SIGNATURE: _a. Johnson_   PHONE: _308-8140_

OFFICE: _DO-ED_

****

THIS SPACE RESERVED FOR FINANCE USE ONLY:

APPROVED: _____   DATE: _____

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

**Office of Finance
Refund Branch
Crystal Park One, Room 802B**

FORM PTO 1577
(01/90)